



SW Positive Control Culture Report Form – *E. coli*

To be filled out at time of collection:

Station Name: _____ Site Number: _____

Date: 2 0 0 _____ Time: _____ District User Code (2 letter code): _____
Y Y Y Y M M D D (military)

Contact: _____ Phone: (____) _____ - _____

To be filled out by laboratory analyst:

Analyzed by (initials): _____ Time in 35°C: _____ (2 hrs)

Medium lot or batch ID: _____ Time in 44.5°C: _____ (22 – 24 hrs)

Membrane pore size: 0.45 µm Time out: _____

Filter lot number: _____

Read by: _____

Colony counts:

Sample size (volume - mL)	<i>E. coli</i>
30 mL (positive control culture obtained from ODML)	
10 mL (positive control culture obtained from ODML)	
3 mL (positive control culture obtained from ODML)	
1 mL (positive control culture obtained from ODML)	
Filter Blank (before plating using 50 mL of sterile buffer)	

Results:

E. coli colonies/100 mL _____

$$100 \times \frac{\text{Count}}{\text{Volume plated}} = \frac{\text{Colonies}}{100 \text{ mL}}$$